

[SYM2.02]**Health information seeking and new technologies in a low-income setting**

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This paper explores ICT-related health-information seeking with particular reference to Bangladesh. Bangladesh has embraced the digital revolution and, by 2003, was reported to have a market for 13 million mobile phones, with over 32 000 village phones operating in 52 districts. Nonetheless, the extent to which mobile phones and other technologies have been adopted for health-seeking information remains unclear (Rahman, 2003).

The paper offers a review of health-information seeking literature, adopting an anthropological perspective. Research focused on qualitative interviews and focus group discussions that compare health-information seeking through ICTs in an urban slum, a rural village and a remote rural community.

Health-information seeking literature generally presumes, in its focus on developed countries, that formal health services are available, despite recognising that this may not be what the seekers are looking for. Health-information seeking in developing countries involves greater complexity as formal health systems are not always able to reach or provide for the entire population; because regulation is weak and mistreatment common, and because of substantial reliance on informal health care, particularly by the poor (Rashid, et. al., 2009).

This paper shows how health-information seekers make use of ICTs to help them decide where to obtain treatment. While the literature emphasises the many factors that shape health-information seeking (the personal characteristics of the seeker, the health context, available services, the search process, quality of information provided, scope for acting on information (Anker, et.al., 2011; Higgins, et.al., 2011), this paper explores how Bangladeshis are using technology in relation to health-information seeking and the factors which operate to constrain, or expand, their opportunities to access appropriate treatment. In particular, people use personal networks within the health system, and the triangulation of health-information through diverse sources, to build up their knowledge of health services and to orientate their search for information.

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